## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)	
	C C00553560
check if X 24-hour report 48-hour report New report X Amends report filed on	09 29 2016
Full Name of Payee	Date of Public Distribution/Dissemination
FORTH RIGHT STRATEGY INC	09 28 2016
Mailing Address 1155 - 15TH STREET NW	amount
SUITE 410	
City State Zip Code	14932.72
	ransaction ID : SE.56782 Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type  004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office S	ought: X House District: 04
MIA LOVE Oppose Pr	resident Senate State: UT
Calcinati Teal to Bate	ement For: Primary X General
Per Election for Office Sought 84824.43 2016	Other (specify) ▶
Full Name of Payee FORTH RIGHT STRATEGY INC	Date of Public Distribution/Dissemination
Mailing Address 1155 - 15TH STREET NW	09 28 2016
- 1100 TOTALETTAW	Amount
City State Zip Code	14932.72
WASHINGTON DC 20005 Tr.	ansaction ID : SE.56783
Purpose of Expenditure  Category/  Category/	Date of Disbursement or Obligation
VOTER CONTACT MAIL  Type  004	09 28 2016
Name of Federal Candidate  Support  Office S	sought: <b>x</b> House District: 23
WILLIAM HURD Oppose Pr	resident Senate State: TX
Calendar Year-To-Date Per Election for Office Sought  Disburse 2016	ement For: Primary   General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	29865.44
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date 09	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)  Check if  24-hour report	I NUMBER W	
Check if  24-hour report  48-hour report  New report  Amends report filed on  09  29	I NUMBER ¥	
Check if  24-hour report  48-hour report  New report  Amends report filed on  99  29  Full Name of Payee  FORTH RIGHT STRATEGY INC  Mailing Address  1155 - 15TH STREET NW  SUITE 410  City  State  Zip Code  WASHINGTON  DC  20005  Purpose of Expenditure		
FORTH RIGHT STRATEGY INC  Mailing Address 1155 - 15TH STREET NW SUITE 410  City State Zip Code WASHINGTON DC 20005  Purpose of Expenditure VOTER CONTACT MAIL		
Mailing Address 1155 - 15TH STREET NW SUITE 410  City State Zip Code WASHINGTON DC 20005  Purpose of Expenditure VOTER CONTACT MAIL	ssemination 2016	
City State Zip Code  WASHINGTON DC 20005  Purpose of Expenditure VOTER CONTACT MAIL  Category/ O04	2010	
WASHINGTON DC 20005  Transaction ID : SE.56784 Date of Disbursement or Oblic Category/ CONTACT MAIL  Category/ CONTACT MAIL		
Purpose of Expenditure VOTER CONTACT MAIL	14932.72	
1ypc	igation Y Y Y Y 2016	
Name of Federal Candidate	strict· 00	
TIMOTHY F SCOTT	State: SC	
Calendar Year-To-Date Per Election for Office Sought  Disbursement For: Primary 2016  Other (specify) ▶	<b>X</b> General	
Full Name of Payee Date of Public Distribution/Dis	ssemination	
Mailing Address	Y	
Amount		
City State Zip Code		
Date of Disbursement or Obl	ligation	
Purpose of Expenditure  Category/ Type	Y   Y   Y   Y   Y	
	strict:	
Oppose President Senate S	State:	
Calendar Year-To-Date Per Election for Office Sought  Disbursement For: □ Primary  Other (specify) ▶	General	
<u> </u>		
(a) SUBTOTAL of Itemized Independent Expenditures	14932.72	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	44798.16	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
SCOTT B MACKENZIE  [Electronically Filed] Date 09 29 2016  Signature	Y	